

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)

Thomas P. Latham

(b) Address (number and street)

P.O. Box 71

(c) City, State and ZIP Code

Clarion

IA

50525-

2. Identification Number

H4IA05102

3. Is This  
Statement☒ New  
(N)

OR

☐ Amended  
(A)

4. Party Affiliation

REPUBLICAN PARTY

5. Office Sought

House

6. State &amp; District of Candidate

IA

04

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2008 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

Latham For Congress

(b) Address (number and street)

P.O. Box 71

(c) City, State and ZIP Code

Clarion

IA

50525-

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

VAIL CONFERENCE

(b) Address (number and street)

1530 O St. NW

(c) City, State and ZIP Code

Washington

DC

20005-

### DECLARATION OF INTENT TO EXPEND PERSONAL FUNDS (House or Senate Only)

9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by

9A

0.00

for the primary election, and

9B

0.00

for the general election.

If you do not intend to expend personal funds exceeding the threshold amount for either election, you must enter "0.00" for each.

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate

Thomas P. Latham

Date

09/13/2007

**NOTE:** Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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